

Centers for Medicare & Medicaid Services
Health Plan Benefits Group
7500 Security Boulevard, C4-23-07
Baltimore, MD 21244

**DATE:** June 13, 2002

**LETTER TO:** All Medicare+Choice Organizations (M+COs)

**FROM:** Gary Bailey, Director /s/

SUBJECT: Delay of the Lock-in Provisions/Impacts to Enrollment Processing with the Centers for Medicare & Medicaid Services (CMS)--ACTION

The President has signed the Bioterrorism Preparedness Act of 2001 yesterday, June 12. As you know, this Act delays the implementation of the Lock-in Provisions of the Balanced Budget Act (BBA) until 2005. These provisions mandated specific timeframes when Medicare beneficiaries could enroll, disenroll and/or elect a plan. The Act allows beneficiaries to continue to enroll or disenroll on a monthly basis.

The purpose of this letter is to notify you regarding the revised systems changes and the implementation schedule resulting from this Act.

Basically, CMS will still require the reporting of the <u>PBP Identifier</u> and the <u>Application Signature Date</u> on enrollments, and on the new PBP election transaction code 71 to process PBP elections.

M+COs will **not** report the type of election; i.e., AEP, OEP.

CMS will <u>not</u> implement the lock-in provisions meaning election limits will not be counted or applied to any transaction.

#### **Revised System Changes**

CMS had notified you in a systems letter dated April 25, 2001 about the revised transactions and in another systems letter dated July 18, 2001 about the revised reports. This section details changes to the formats that were described to you in those letters.

Data submittal requirements for transaction types 71 (PBP Election), 61 (Enrollment), 60 (EGHP Retroactive Enrollment) and 51 (Disenrollment) will be revised. There will be a minor revision to the Transaction Reply Report (TRR) to remove the Election Type field, and some transaction reply codes will now be eliminated. See attached transaction and report layouts.

• Transaction type 71 – The Institutional Flag has been removed from the layout and the Election Type field is now the PBP Correction Flag. The transaction length remains 80 characters. M+COs are to input an X in the PBP Correction Flag field when correcting a PBP Identifier with no change in the effective date. Please note that this function will only be available until the systems cutoff day in December (12/10/2002). You will receive transaction reply code 112 (Rejected; Conflicting Dates) if you submit PBP corrections after 12/10/2002. M+COs are to leave the PBP Correction Flag blank when reporting a PBP election for a member.

| Trans Type | Purpose     | Timeframe  | Data Reqs             |
|------------|-------------|------------|-----------------------|
| 71/X       | Correct PBP | June 1 –   | Application           |
|            |             | December   | Signature Date and    |
|            |             | 10, 2002   | Effective Date* are   |
|            |             |            | NOT required.         |
|            |             |            | Place an X in the     |
|            |             |            | PBP Correction        |
|            |             |            | Flag field. All other |
|            |             |            | data on the layout is |
|            |             |            | required.             |
| 71/ no X   | Report PBP  | June 1 and | Do not input data in  |
|            | election    | ongoing    | the PBP Correction    |
|            |             |            | Flag field. All       |
|            |             |            | other data on the     |
|            |             |            | layout is required.   |

<sup>\* =</sup> The 71X transaction will update only the PBP # of an open PBP period back to 6/1/2002 or whenever the PBP period began (if it began after that date). M+COs cannot update the PBP # of a closed PBP period. If this occurs, transaction reply code 112 (Rejected; Conflicting Dates) will be received.

- Transaction types 61 and 60 The Institutional Flag and the Election Type fields have been removed from the layout. The transaction length remains 80 characters. If data is provided in these fields, the transaction will not be rejected but the data will not be processed. The PBP Identifier and the Application Signature Date are still required.
- Transaction type 51 The Institutional Flag and the Election Type fields have been removed from the layout. The transaction length remains 80 characters. The PBP Identifier and the Application Signature Date fields are not required to be reported on this transaction type. If data is provided in these fields, the transaction will not be rejected but the data will not be processed.

- Transaction Reply report The Election Type field has been removed from the layout, but the PBP Identifier remains. The length of the file remains 133 characters.
- **Monthly Membership report** There is no change to this report; the PBP Identifier remains. The length of the file remains 200 characters.
- Transaction Reply Codes New transaction reply codes (100-112) were added to notify you of PBP and election limit processing (See revised listing in the Qs and As located at

http://CMS.HHS.GOV/HEALTHPLANS/SYSTEMS/PBPLOCKIN.HTM.) Based on the legislation delaying the implementation of the election limits, the following codes will <u>not</u> be reported.

| 101 | Rejected; invalid institutional flag          |  |  |  |  |
|-----|---|--|--|--|--|
| 103 | Transaction orbiting; ICEP election with      |  |  |  |  |
|     | missing A/B entitlement date                  |  |  |  |  |
| 104 | Rejected; invalid or missing election type    |  |  |  |  |
| 105 | Rejected; invalid effective date for election |  |  |  |  |
|     | type  |  |  |  |  |
| 108 | Rejected; election limits exceeded            |  |  |  |  |

#### **Implementation Schedule**

PBP processing will be phased-in over the July 1 and August 1 enrollment and payment cycles.

#### July 1 Cycle (June 1 – June 13)

M+COs can submit transactions in the revised formats beginning June 1; processing will occur as follows.

| TRANS TYPE       | RESULT   |
|------------------|--|
| 51               | Processed; appear on 7/1 TRR*/MMR                    |
| 60 – valid PBP   | Processed; appear on 7/1 TRR*/MMR                    |
| 60 – invalid PBP | Processed; not rejected, appear on 7/1 TRR*/MMR; but |
|                  | default PBP will appear on the 7/1 MMR               |
| 61 – valid PBP   | Processed; appear on 7/1 TRR*/MMR                    |
| 61 – invalid PBP | Processed; not rejected, appear on 7/1 TRR*/MMR; but |
|                  | default PBP will appear on the 7/1 MMR               |
| 71X              | Hold; will not appear on 7/1 TRR/MMR                 |
| 71 no X          | Hold; will not appear on 7/1 TRR/MMR                 |

\* = The results of processing the transaction types 51, 60 and 61 will appear on the Transaction Reply Report (TRR), but NOT the associated PBP #. The revised TRR format will not be available until after the August 1 run.

#### August 1 Cycle (June 19 – July 12)

M+COs continue to submit transactions in the revised formats; processing will occur as follows. The revised TRR format is implemented.

| TRANS TYPE       | RESULT   |
|------------------|--|
| 51               | Processed; appear on 8/1 TRR/MMR                             |
| 60 – valid PBP   | Processed; appear on 8/1 TRR/MMR                             |
| 60 – invalid PBP | Rejected, appear on the 8/1 TRR                              |
| 61 – valid PBP   | Processed; appear on 8/1 TRR/MMR                             |
| 61 – invalid PBP | Rejected, appear on the 8/1 TRR                              |
| 71X              | Processed; all such transactions submitted since June 1 will |
|                  | appear on the 8/1 TRR/MMR                                    |
| 71 no X          | Processed; all such transactions submitted since June 1 will |
|                  | appear on the 8/1 TRR/MMR                                    |

After the August 1 cycle, processing and reporting will occur normally.

#### **Contact Information**

If you have any general questions concerning the material contained in this letter, please contact Kim Miegel at 410-786-3311 or <a href="mailto:Kmiegel@cms.hhs.gov">Kmiegel@cms.hhs.gov</a>.

If you have technical questions, please contact the Central Office technical staff person assigned to the region where your M+CO is located.

| REGION          | CONTACT      | PHONE #      | E-MAIL                |
|-----------------|--------------|--------------|-----------------------|
| I – III and VII | Sarah Brown  | 410-786-6358 | Sbrown1@cms.hhs.gov   |
| IV – VI         | Sue Hartmann | 410-786-6192 | Shartmann@cms.hhs.gov |
| VIII – X        | Sue Mathis   | 410-786-6938 | Smathis@cms.hhs.gov   |

Attachments

# M+CO Enrollment Transaction Type 61 or 60

| #   | FIELD NAME     | LEN | COLS  | DESCRIPTION                               |
|-----|----------------|-----|-------|---|
| 1   | CLAIM.NUM      | 12  | 1-12  | 9 digit SSN + 2 char BIC (Beneficiary     |
|     |                |     |       | Identification Code) OR 12 char RRB       |
|     |                |     |       | (Railroad Retirement Board) Number        |
| 2   | SURNAME        | 12  | 13-24 | Beneficiary Surname                       |
| 3   | FIRST.NAME     | 7   | 25-31 |   |
| 4   | MIDDLE.INITIAL | 1   | 32-32 | Beneficiary Middle Initial                |
| 5   | SEX.CD         | 1   | 33-33 |   |
|     |                |     |       | '1' = Male                                |
|     |                |     |       | '2' = Female                              |
|     |                |     |       | '0' = Unknown                             |
| 6   | BIRTH.DT       | 8   | 34-41 | Beneficiary Birth Date                    |
|     |                |     |       | Format: YYYYMMDD                          |
| 7   | [Reserved]     | 1   | 42-42 |   |
| 8   | PBP.ID         | 3   | 43-45 | ${oldsymbol{arepsilon}}$                  |
|     |                |     |       | Format: 999                               |
| 9   | [Reserved]     | 1   | 46-46 |   |
|     | CONTRACT.NUM   | 5   | 47-51 |   |
| 11  | SIGNATURE.DT   | 8   | 52-59 | 3 6 11                                    |
|     |                |     |       | enroll in Contract and elect Plan Benefit |
|     |                |     |       | Package                                   |
|     |                |     |       | Format: YYYYMMDD                          |
| 12  | TRAN.CD        | 2   | 60-61 | Transaction Type Code:                    |
|     |                |     |       | '60' = Employer Group Enrollment          |
| 1.2 | FD 17          |     | (2.62 | '61' = Enrollment                         |
| 13  | [Reserved]     | 2   | 62-63 | SPACES Enrollment and Election Effective  |
| 14  | EFFECT.DT      | 8   | 64-71 | Enrollment and Election Effective   Date  |
|     |                |     |       | Format: YYYYMMDD                          |
| 15  | [Reserved]     | 8   | 72-79 | SPACES                                    |
| 16  | PRIOR.COM.CT   | 1   | 80-80 | Prior Commercial Month Count:             |
|     |                |     |       | '1' thru '9' = number of months           |
|     |                |     |       | 'A' thru 'F' = 10 months thru 15 months   |
|     |                |     |       | '0', SPACE = 0 months (TRAN.CD must       |
|     |                |     |       | be '61')                                  |
|     |                |     |       |   |

## M+CO Election Transaction Type 71

| #  | FIELD NAME      | LEN | COLS  | DESCRIPTION                                    |
|----|-----------------|-----|-------|--|
| 1  | CLAIM.NUM       | 12  | 1-12  | 9 digit SSN + 2 char BIC (Beneficiary          |
|    |                 |     |       | Identification Code) OR 12 char RRB            |
|    |                 |     |       | (Railroad Retirement Board) Number             |
| 2  | SURNAME         | 12  | 13-24 | Beneficiary Surname                            |
| 3  | FIRST.NAME      | 7   | 25-31 | Beneficiary Given Name                         |
| 4  | MIDDLE.INITIAL  | 1   | 32-32 | Beneficiary Middle Initial                     |
| 5  | SEX.CD          | 1   | 33-33 | Beneficiary Sex Code:                          |
|    |                 |     |       | '1' = Male                                     |
|    |                 |     |       | '2' = Female                                   |
|    |                 |     |       | '0' = Unknown                                  |
| 6  | BIRTH.DT        | 8   | 34-41 | Beneficiary Birth Date                         |
|    |                 |     |       | Format: YYYYMMDD                               |
| 7  | [Reserved]      | 1   | 42-42 | SPACES   |
| 8  | PBP.ID          | 3   | 43-45 | Plan Benefit Package Id                        |
|    |                 |     |       | Format: 999                                    |
| 9  | CORRECTION.FLAG | 1   | 46-46 | 'X' = Correction Transaction                   |
|    |                 |     |       | NOT 'X' = Ignored/No Meaning                   |
| 10 | CONTRACT.NUM    | 5   | 47-51 | Contract Number                                |
| 11 | SIGNATURE.DT    | 8   | 52-59 | Date Beneficiary signed Application to elect a |
|    |                 |     |       | different Plan Benefit Package                 |
|    |                 |     |       | Format: YYYYMMDD                               |
|    |                 |     |       | REQUIRED UNLESS                                |
|    |                 |     |       | CORRECTION.FLAG = 'X'                          |
| 12 | TRAN.CD         | 2   | 60-61 | Transaction Type Code:                         |
|    |                 |     |       | '71' = Plan Benefit Package Election           |
| 13 | [Reserved]      | 2   | 62-63 | SPACES   |
| 14 | EFFECT.DT       | 8   | 64-71 | Election Effective Date                        |
|    |                 |     |       | Format: YYYYMMDD                               |
|    |                 |     |       | REQUIRED UNLESS                                |
|    |                 |     |       | CORRECTION.FLAG = 'X'                          |
| 15 | [Reserved]      | 9   | 72-80 | SPACES   |

### Disenrollment Transaction Type 51

| #  | FIELD NAME     | LEN | COLS  | DESCRIPTION                           |
|----|----------------|-----|-------|---------------------------------------|
| 1  | CLAIM.NUM      | 12  | 1-12  | 9 digit SSN + 2 char BIC (Beneficiary |
|    |                |     |       | Identification Code) OR 12 char RRB   |
|    |                |     |       | (Railroad Retirement Board) Number    |
| 2  | SURNAME        | 12  | 13-24 | Beneficiary Surname                   |
| 3  | FIRST.NAME     | 7   | 25-31 | Beneficiary Given Name                |
| 4  | MIDDLE.INITIAL | 1   | 32-32 | Beneficiary Middle Initial            |
| 5  | SEX            | 1   | 33-33 | Beneficiary Sex Code:                 |
|    |                |     |       | '1' = Male                            |
|    |                |     |       | '2' = Female                          |
|    |                |     |       | '0' = Unknown                         |
| 6  | BIRTH.DT       | 8   | 34-41 | Beneficiary Birth Date                |
|    |                |     |       | Format: YYYYMMDD                      |
| 7  | [Reserved]     | 5   | 42-46 | SPACES                                |
| 8  | CONTRACT.NUM   | 5   | 47-51 | Contract Number                       |
| 9  | [Reserved]     | 8   | 52-59 | SPACES                                |
| 10 | TRAN.CD        | 2   | 60-61 | Transaction Type Code:                |
|    |                |     |       | '51' = Disenrollment                  |
| 11 | [Reserved]     | 2   | 62-63 | SPACES                                |
| 12 | EFFECT.DT      | 8   | 64-71 | Disenrollment Date                    |
|    |                |     |       | Format: YYYYMMDD                      |
| 13 | [Reserved]     | 9   | 72-80 | SPACES                                |

## Transaction Reply - Data File

|     | 2002 Transaction Reply Data File Record Layout |     |       |   |  |  |  |
|-----|--|-----|-------|---|--|--|--|
| #   | Field Name                                     | Len | Pos   | Description   |  |  |  |
| 1   | Claim Number                                   | 12  | 1-12  | Claim Number as Entered<br>External Format  |  |  |  |
| 2   | Surname  | 12  | 13-24 | Surname   |  |  |  |
| 3   | First Name                                     | 7   | 25-31 | First Name  |  |  |  |
| 4   | Initial  | 1   | 32-32 | Initial   |  |  |  |
|     |  |     | 33-33 | 1 = Male  |  |  |  |
| 5   | Sex  | 1   |       | 2 = Female  |  |  |  |
|     |  |     |       | 0 = Unknown   |  |  |  |
| 6   | Birth Date                                     | 8   | 34-41 | FORMAT YYYYMMDD   |  |  |  |
| 7   | N. 11 1  | 1   | 42-42 | 1 = Medicaid Status   |  |  |  |
| 7   | Medicaid Indicator                             | 1   |       | 0 = Not Medicaid Status   |  |  |  |
| 8   | Contract Number                                | 5   | 43-47 | Contract Number   |  |  |  |
| 9   | State Code                                     | 2   | 48-49 | State Code  |  |  |  |
| 10  | County Code                                    | 3   | 50-52 | County Code   |  |  |  |
| 1.1 | D: 11 11 1: 4                                  | 1   | 53-53 | 1 = Disabled  |  |  |  |
| 11  | Disabled Indicator                             | 1   |       | 0 = Not Disabled  |  |  |  |
| 12  | II I 1:  | 1   | 54-54 | 1 = Hospice Status  |  |  |  |
| 12  | Hospice Indicator                              | 1   |       | 0 = Not Hospice Status  |  |  |  |
|     |  |     | 55-55 | 1 = Institutional Status  |  |  |  |
| 13  | Institutional/NHC<br>Indicator                 | 1   |       | 2 = NHC Status  |  |  |  |
|     |  |     |       | 0 = Not Institutional/NHC Status  |  |  |  |
| 14  | ESRD Indicator                                 | 1   | 56-56 | 1 = ESRD Status   |  |  |  |
| 14  | ESKD Ilidicator                                | 1   |       | 0 = Not ESRD Status   |  |  |  |
| 15  | Transaction Reply<br>Code                      | 3   | 57-59 | FORMAT 999  |  |  |  |
| 16  | Transaction Type Code                          | 2   | 60-61 | FORMAT 99   |  |  |  |
| 17  | Entitlement Type Code                          | 1   | 62-62 | See Note 1  |  |  |  |
| *18 | Effective Date                                 | 8   | 63-70 | IF TRANSACTION REPLY ONE OF: 011,012,016,017,021- 023,038,052,080,082- 084,100,109,112 THEN contains Transaction Effective Date FORMAT YYYYMMDD |  |  |  |

|               | 2002 Transaction Reply Data File Record Layout |     |         |   |  |  |  |
|---------------|--|-----|---------|---|--|--|--|
| #             | Field Name                                     | Len | Pos     | Description   |  |  |  |
| 19            | Working Aged<br>Indicator                      | 1   | 71-71   | 1 = Working Aged Status<br>0 = Not Working Aged Status  |  |  |  |
| *20           | Plan Benefit Package<br>Id                     | 3   | 72-74   | FORMAT 999  |  |  |  |
| *21           | [Reserved]                                     | 1   | 75-75   | SPACES  |  |  |  |
| 22            | Transaction Date                               | 8   | 76-83   | FORMAT YYYYMMDD   |  |  |  |
| 23            | FILLER   | 1   | 84-84   | SPACES  |  |  |  |
|               | DATA GROUP<br>FIELDS 24 - 25                   | 12  | 85-96   | IF TRANSACTION REPLY = 022, 025 or 086 THEN contains Claim Number   |  |  |  |
| 24<br>&<br>25 | Claim Number                                   | 12  | 85-96   | Claim Number as Filed External Format   |  |  |  |
|               | DATA GROUP<br>FIELDS 24 - 25                   | 12  | 85-96   | IF TRANSACTION REPLY ONE OF: 013,014,018,021,024,027-029,035,036,045,048,049,053-056,066,067,071-084,089-092,099 THEN contains Transaction Effective Date |  |  |  |
| 24            | Transaction<br>Effective Date                  | 8   | 85-92   | FORMAT YYYYMMDD   |  |  |  |
| 25            | FILLER   | 4   | 93-96   | SPACES  |  |  |  |
|               | DATA GROUP<br>FIELDS 24 – 25                   | 12  | 85-96   | IF TRANSACTION REPLY = 085 THEN contains Residence SCC  |  |  |  |
| 24            | Residence SCC                                  | 5   | 85-89   | FORMAT SSCCC 2 digit state code plus 3 digit county code  |  |  |  |
| 25            | FILLER   | 7   | 90-96   | SPACES  |  |  |  |
| 26            | SSA District Office<br>Number                  | 3   | 97-99   | IF TRANSACTION TYPE = 53 THEN contains SSA District Office Number   |  |  |  |
| 27            | Demographic Part A<br>Rate                     | 8   | 100-107 | FORMAT ZZZZ9.99   |  |  |  |
| 28            | Demographic Part B<br>Rate                     | 8   | 108-115 | FORMAT ZZZZ9.99   |  |  |  |
| 29            | Source Code                                    | 5   | 116-120 | Contract Number of MCO  |  |  |  |

|     | 2002 Transaction Reply Data File Record Layout |     |         |   |  |  |
|-----|--|-----|---------|---|--|--|
| #   | Field Name                                     | Len | Pos     | Description   |  |  |
|     |  |     |         | submitting transaction, or Program Identifier for system-generated transactions |  |  |
| *30 | Old Plan Benefit<br>Package Id                 | 3   | 121-123 | IF TRANSACTION TYPE = 71 THEN contains Old Plan Benefit Package Id              |  |  |
| *31 | FILLER   | 10  | 124-133 | SPACES  |  |  |